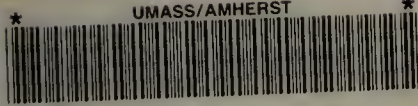


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Massachusetts  
Developmental Disabilities Council



## APPLICATION KIT

**Developmental Disabilities  
Grants for Early Childhood  
Intervention Materials**





*The Commonwealth of Massachusetts*  
*Massachusetts Developmental Disabilities Council*  
*Leverett Saltonstall Building, Room 909*  
*100 Cambridge Street*  
*Boston 02202*

area code 617  
727-4178

APPLICATION KIT

DEVELOPMENTAL DISABILITIES GRANTS FOR EARLY CHILDHOOD INTERVENTION MATERIALS

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YELLOW SECTION. . . . .	General Guidelines
BLUE SECTION. . . . .	Instructions for Preparing Application for Developmental Disabilities Grant
WHITE SECTION. . . . .	TEAR-OUT APPLICATION FORMS Letter of Intent to Apply Application Checklist General Information (Face Sheet) Application Summary Proposed Budget for Grant Period Financial Interest Disclosure Civil Rights Assurance
PINK SECTION. . . . .	Outline and Instructions for Developing Narrative Project Description Guidelines and Instructions for Developing Human Rights Assurances

See also CONDITIONS OF GRANT AWARDS





*The Commonwealth of Massachusetts*  
*Massachusetts Developmental Disabilities Council*  
*Leverett Pattonstall Building, Room 909*  
*100 Cambridge Street*  
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727-4178

GENERAL GUIDELINES

DEVELOPMENTAL DISABILITIES GRANTS FOR EARLY CHILDHOOD INTERVENTION MATERIALS

AUTHORITY AND PURPOSE

Under the Commonwealth's State Plan for the utilization of Federal funds authorized by P.L. 91-517, the Developmental Disabilities Services and Facilities Construction Act of 1970, the Massachusetts Developmental Disabilities Council will award grants for the development, publication, and/or distribution of materials which will have an impact on early childhood intervention on a statewide basis. Applications might include, but are not limited to, the following areas:

- Information for parents regarding the early detection of symptoms of developmental disabilities which should be evaluated;
- Information for parents, professionals, or other personnel dealing with infants and young children regarding resources for information and referral, evaluation, services;
- Materials or curricula for training parents or others to assist developmentally disabled infants and young children.

ELIGIBLE APPLICANTS

Only public or private non-profit agencies and organizations are eligible to apply for these grants.

GRANT PROVISION

These grants are intended for the compilation, editing, publication, reproduction, and/or distribution of information relevant to early childhood intervention, and not for research or demonstration activities leading to the development of new information. The level of funding should generally not exceed \$10,000.

APPLICATION DEADLINE

Applications must be submitted to the Massachusetts Developmental Disabilities Council no later than January 31, 1973. If sufficient applications are received prior to the deadline, an early review may be made. Applicants should anticipate a four to six month lag between application submission and funding.



### FEDERAL FINANCIAL PARTICIPATION ("MATCHING")

Federal (grant) funds may not constitute more than 70% of the total funds available to carry out the project. The remaining 30% must be from other, non-Federal sources. Applicants who will distribute materials to residents of areas of urban and rural poverty may qualify for a special matching rate of 90% to 10%.

### SELECTION

Priority will be given to projects with the greatest credibility relative to a.) ability to produce a quality product b.) assurance that the product will reach the target population and be used as intended and c.) feasibility.

Priority will also be given to those projects which d.) promise the greatest impact, with consideration being given to the relationship between the potential impact and the project cost, e.) bring together a number of agencies to achieve mutual goals and draw funds or contributions from various sources, f.) concern themselves with younger and more profoundly or severely handicapped children and, g.) focus on needs of areas of urban and rural poverty.

### APPLICATION CONTENT AND REQUIREMENTS

1. Letter of Intent (1 copy). Upon receiving the application materials, the applicant should return the Letter of Intent form if he intends to develop a formal application for a grant.

2. Substantive Application (20 copies). The substantive part of an application to be reviewed by the Massachusetts Developmental Disabilities Council includes:

- (a) Basic information and signatures
- (b) Project Summary
- (c) A proposed project budget (Budget Form A)
- (d) Budget justification (narrative)
- (e) A narrative presentation of the plans for materials development and/or distribution in accordance with the outline furnished
- (f) Biographical sketches of professional personnel and consultants
- (g) Relevant letters of agreement, endorsement, or cooperation; and other supporting materials.

3. Human Rights Assurances (5 copies). Human Rights Assurances must be developed in accordance with the enclosed "Human Rights Guidelines for Applicants" and submitted in five copies with the application.

4. Administering Agency Requirements (2 copies each). The Administering Agency requires two copies of each of the following documents:

- (a) a letter from the Secretary of the Board of Directors or Trustees of a private agency or organization that the official signing the application has the authority to sign; and the date such authorization was made.
- (b) proof of voluntary non-profit status must be submitted if the applicant is a private non-profit agency or organization.
- (c) a Financial Interest Disclosure form; and
- (d) DHEW Civil Rights Assurances.

5. Checklist (1 copy). A checklist form should be returned with the completed application indicating what the applicant is submitting.

#### APPLICATION PROCESSING

Each application will be processed in the following manner: (i) upon receipt, each application will be subjected to a technical review to ascertain whether it meets all the conditions of application. Staff will contact the applicant if clarification or minor amendments are required. If the application is not complete or in order, and cannot be adequately amended prior to review meetings, it will be returned to the applicant with a letter from the chairman explaining the deficiency. (ii) Applications which are technically acceptable will be reviewed by the MDDC's Review Committee which will determine whether a project is approvable, based on the criteria described by the Council. (iii) All applications approved by the Review Committee will be subjected to a second review by the Human Rights Committee, which will be responsible for certifying the adequacy of human rights assurances. (iv) Both committees will report their recommendations to the MDDC, which will make a determination whether the application can be approved under the provisions and priorities. (v) The Chairman will notify the applicant of the MDDC's action by letter. At the same time, a list of approved applications will be conveyed to the Administering Agency for funding, in order of priority as assessed by the MDDC. (vi) Any applicant may apply to the Chairman for clarification in writing of the Council's actions. Applications which are not approved may be resubmitted with or without amendments for rereview.

#### NOTIFICATION OF GRANT AWARD

When an approved application is funded, the applicant receives a Notice of Grant Award from the Executive Office for Administration and Finance. This notice indicates the beginning and ending dates of the approved project period, the amount of the award, the approved budget, and any general or special conditions of the award which might include specific payment arrangements.

All unfunded project applications on file at the end of the fiscal year's review cycle will be considered inactive and applicants will be advised to contact the Council's staff concerning the eligibility of their project for resubmission under the stated goals and objectives of the next fiscal year plan.



#### CONSULTATION AND TECHNICAL ASSISTANCE

The council's staff will assist applicants in obtaining information and consultation concerning materials development and distribution. The staff will also provide direct assistance in completing application forms. Requests for such assistance should be directed to the attention of Mrs. Maxine Rubin.

#### GRANTEE RESPONSIBILITY

The applicant, when applying for a project grant, agrees to all conditions set forth by the administering agency, the Executive Office for Administration and Finance, as enumerated in "Conditions of Grant Awards: The Developmental Disabilities Services and Facilities Construction Act (P.L. 91-517)" (August, 1972). Listed below are special conditions which apply to grants for early childhood intervention materials, in addition to the above.

The grantee assumes responsibility for fiscal administration, program management, and fulfillment of all special conditions which may be prescribed for the conduct of the project. The grantee also assumes responsibility for delivering all products specified in the project application.

#### SPECIAL CONDITIONS

1. Special consideration of areas of urban and rural poverty

All projects must include provisions for giving special considerations to areas of urban and rural poverty regarding such issues as appropriateness of content of materials, appropriateness of language, special distributional requirements, etc.

2. Materials for persons unable to pay therefor

Plans for distribution of materials must include provisions for making a reasonable number of copies of materials available without cost to persons unable to pay therefor.

3. Materials for the Executive Office of Administration and Finance

60 copies of finished materials should be made available for the Executive Office of Administration and Finance.

4. Number of copies

The specific number of copies to be distributed must be cited.

5. Copyright

No copyright privileges may be exercised until distribution requirements are satisfied.

#### HUMAN RIGHTS ASSURANCE

Applicants for projects must be in compliance with the Massachusetts Developmental Disabilities Council policies concerning human rights before the application can be considered for funding. Human Rights Assurances must be submitted with the application regardless of whether the applicant already has an assurance on file with the Federal government.



### FUNDING

Funds will generally be made available by check in advance of actual expenditures unless otherwise stipulated in the Notice of Grant Award. Accounting for grant funds and matching funds must be in compliance with the "Conditions of Grant Awards."

### REPORTS AND AUDIT

A final progress and fiscal report must be submitted at the end of the project period. The grantee must also have an independent audit made of all fiscal accounting records, to be submitted as part of this report. The cost of this audit may be charged to grant funds. Interim reports may also be required, depending on the length of the project period.

### PROJECT APPROVAL

Project approval will be contingent on satisfaction of the following conditions:

1. The application must be complete and technically adequate.
2. Only those projects that hold significant promise toward the alleviation of a developmental disability or toward the social, personal, physical or economic habilitation or rehabilitation of individuals with such developmental disabilities will be approved.
3. The project must be concerned with the needs of mentally retarded, cerebral palsied, and epileptic persons in all geographic areas.
4. The project must be ultimately concerned with the community use of the materials developed.
5. The application must demonstrate a need for the project, and adequate and appropriate plans for its administration, operation, staffing, and budget.
6. The application must describe the material or materials to be developed, related to the implementation of the project's goals and objectives.
7. The applicant must have the ability and authority to carry out activities and endeavors promised.

### PRIORITY FOR FUNDING

Approved projects will be ranked for priority for available funding on the basis of the following criteria: (1) potential impact of materials; (2) uniqueness of effort; (3) ability, authority, and appropriateness of applicant to carry out project; (4) strength of project's provisions to give special consideration to the needs of poverty areas; (5) quality of proposed documents and appropriateness to attainment of objectives; (6) appropriateness of budget and staffing; (7) feasibility and credibility.



MASSACHUSETTS DEVELOPMENTAL DISABILITIES COUNCIL  
Room 909, 100 Cambridge Street  
Boston, Massachusetts 02202

INSTRUCTIONS FOR PREPARING APPLICATION FOR DEVELOPMENTAL DISABILITIES GRANT

GENERAL INFORMATION

The General Guidelines for each type of Developmental Disabilities grant outline the requirements for application. Some of the requirements are to be met by completing the enclosed application forms; other requirements must be satisfied by submitting attachments. Whenever forms are provided, the applicant **MUST** use these forms. Applicants should refer to the General Guidelines for information concerning all requirements, the number of copies required, and the deadlines for submission of applications.

All application copies must be legible and must be duplicated by a process other than Thermofax on paper no larger than 8 1/2"x 11". Duplicated copies of applications should be collated and assembled. Incomplete or inadequately prepared applications may result in the rejection of the application. Please read the instructions carefully in preparing the application.

If you require further clarification, or technical assistance in completing the application, please contact the Developmental Disabilities consultant named in the General Guidelines.

SPECIFIC INSTRUCTIONS

GENERAL INFORMATION (FACE SHEET)

Title of Project

Give the project a brief descriptive title, not to exceed 53 typewriter spaces, which can be used for identification and reference purposes.

Name and Address of Applicant Agency or Organization

The applicant agency or organization is the institution which is to assume legal and financial responsibility and accountability for the use and disposition of any funds awarded. If two or more agencies will be jointly responsible, list them jointly. If one agency will be responsible, and others will cooperate, list the cooperating agencies on a separate attached sheet.

Name and Title of Project Director

Indicate the name and title of the individual responsible for the direction and conduct of project activities, including the preparation and submission of any required reports and products.



Name, Title, and Address of Financial Officer

Indicate the name, title, and address of the individual responsible for receipt accountability and reporting use of developmental disabilities project funds.

Type of Agency or Organization

Check the appropriate box to indicate whether the agency or organization making application is a State, other public, or other non-profit organization or agency. An organization is considered non-profit when no part of the net earnings inure or may lawfully inure to the benefit of any private shareholder or individual. Grants may not be made to individuals or profit-making organizations.

Proposed Term of Project

Indicate the anticipated dates the project will be initiated and completed. In determining the Starting Date, take into consideration the time required for submitting and processing the application (see General Guidelines). Project terms will normally be limited to approximately one year, but may be completed over as many as three years on the initial funds if the applicant agency or organization wishes to expend the grant funds over a longer period. There are no provisions for additional funds for the longer period, or for continuation grants.

Applicants for start-up grants should define the term of the project as one year even if they intend to use the grant funds in the first quarter, or other shorter period. This will enable them to use a full year's expenditures from other sources as "matching" contributions.

Total Funds Involved

Indicate the total amount of P.L. 91-517 funds (grant funds) requested in the left-hand box. Enter funds to be provided from other sources in the right-hand box.

Terms and Conditions

In signing the application, the applicant certifies his agreement with all stipulated conditions, including compliance with the Administering Agency's "Conditions of Grant Awards," Civil Rights and Human Rights Assurances, and relevant Federal, State, and local laws, regulations and standards pertinent to the grant. Fundamental conditions are included in the grant application materials, and should be read carefully by the applicant.

Date

Indicate the date the completed application is signed and sent forward to the Massachusetts Developmental Disabilities Council.

Signature and Title of Responsible Officer

The application must be signed by an officer of the agency or organization who is authorized to commit the agency or organization to the conditions of the grant award and other requirements of the application. Documentation of the

authority of this person to sign must be submitted if the applicant is a private agency or organization. This documentation should be in the form of a letter from the Secretary of the governing board stating that the signator has the authority to sign, and the date such authorization was made.

#### BUDGET FORM A, "PROPOSED BUDGET FOR GRANT PERIOD"

The data requested in this section are designed to show specific elements of cost connected with the conduct of a developmental disabilities project grant. Applicants should refer to the document entitled "Conditions of Grant Awards" for information concerning the allowability of specific budget items. If an item is not mentioned, the applicant may contact the consultant named in the General Guidelines for clarification of allowability. As noted, the fact that a particular type of expenditure is not mentioned in the above-named document does not imply that it is either allowable or not allowable.

"Not Allowable" means that a particular item of cost may not be charged to the grant. The applicant may, of course, charge such costs to other sources, subject to any conditions imposed by those other sources. All costs related to carrying out the project within the proposed term noted on the face sheet should be reflected in the "Proposed Budget for Grant Period" regardless of whether they are allowable, or whether they will be charged to the grant or used for matching purposes.

#### Personnel

For staff assigned to project functions, list the position title and the name of the occupant or prospective incumbent, if known. In the second column note the annual full-time salary for the position. 100% time in the following column should represent that the individual's total full-time salary is earned while engaged in project activities. Enter the dates staff will begin and end their commitment to the project in the fourth column. Dates may not be before or after the "Proposed Term of Project" dates entered on the face sheet, but may be for some shorter period. In the fifth column enter the amount which will be required to recompense the staff member during the project period, regardless of source. In the final column, specify the source of funds from which salary payments will be made (P.L. 91-517 grant funds, cash in hand, contract for services with state agency, fees, etc.)

The amount needed as the employer share for social security contributions, pension funds, and similar taxes or payments made in connection with the personnel employed on the project should be shown as "Fringe Benefits for Personnel" in the line provided. Totals for funds to be used from all sources and from P.L. 91-517 grant funds ONLY should be entered where indicated.

#### Consultation and Volunteer Costs

List all charges attributable to consultation, including consultant fees, travel, per diem, and related costs. Enter the name of specific consultants where known, and their area of competence. If not known, enter the area of consultation to be sought,

such as "statistical consultation," under "Nature of Expense."

Costs attendant to the participation of volunteer staff may also be included under this category. Normally, such costs will refer to reimbursement of expenses incurred by the volunteer as a result of his participation in the project. If volunteers are paid a stipend, or at a rate based on time contributed or work performed, they should be considered personnel and entered in that category.

### Travel

This item is for staff travel only. Any travel listed in this item must be for the purpose of supporting grant activities as described in the application. The purposes of anticipated travel, destinations, and approximate cost should be explained in the "Budget Justification" narrative if not evident from the Narrative Project Description.

### Equipment

An item of equipment is an article of property procured or fabricated which is complete in itself, is of a durable nature, and has an expected service life of more than one year. List individually each item of equipment to be purchased (including in the cost charges for installation, insurance, freight, and accessories.) If equipment is to be leased or rented, note this parenthetically next to the entry.

If several pieces of equipment are to be purchased or rented, group categories of equipment in this section of Budget Form A, and use Budget Form A2 for itemization of individual pieces of equipment.

For the convenience of reviewers, furnishings required for new community residences or other new program facilities should be listed under "Furnishings" rather than "Equipment."

### Supplies, Materials, and Publications

This category covers supplies, materials, printing costs (including duplication and reproduction), general correspondence, and distribution costs. Entries under "Nature of Expense" should represent general types of expenses, such as "office supplies," "publication of manual," "distribution of questionnaires," or "toys."

### Furnishings

START-UP GRANTS ONLY. This category covers furniture, appliances, and accessories needed for the facility. Entries under "Nature of Expense" should represent general categories of furnishings. An itemized list should be made on Budget Form A2 listing expenditures or categories of expenditure over \$50.00.

### Renovations

START-UP GRANTS ONLY. List general types of repairs and renovations to be made with the estimated costs for labor and materials. Note that under the conditions of grant awards, no structural renovations may be made.



Space Occupancy

List the costs related to space occupancy, including rent payments, heat, electricity, maintenance, and insurance costs. Such costs as mortgage payments and property taxes should also be listed under this category, but are not chargeable to the developmental disabilities grant. No costs related to the construction or acquisition of buildings, parts of buildings, or land may be charged to grant funds.

Other

List any other direct costs to be incurred which are not covered by the specified budget categories, such as telephone, license fees, etc. Agencies wishing to charge the grant for the cost of the independent audit required at the end of the grant period should enter this cost under this category.

Budget Summary

- Column 1: Enter the GRAND TOTAL of the "Total Required. . .All Sources" for all budget categories.
- Column 2: Enter the GRAND TOTAL of the "Total Requested. . .P.L. 91-517 Only" for all budget categories.
- Column 3: Enter the percentage that the amount in Column 2 bears to the amount in Column 1.
- Column 4: Enter the total amount of funds to be contributed from other sources (Column 1 minus Column 2).
- Column 5: Enter the percentage that the amount in column 4 bears to the amount in Column 1.

The total amount claimed for indirect costs should be reflected in the space identified for this purpose. Refer to the "Conditions of Grant Awards" for instruction regarding indirect costs. If more than a total of 10% of the direct costs is claimed, supporting information must be submitted as part of the application. No more than 10% of the direct costs can be charged to the grant as indirect costs under any circumstances.

BUDGET FORM A2, "ITEMIZATION OF FURNISHINGS AND EQUIPMENT"

Use this form to itemize furnishings and equipment grouped together in those categories on Budget Form A (when the number of individual items is greater than the number of spaces provided in the main budget form).

BUDGET JUSTIFICATION

Attach a narrative explanation of any budget items whose need or relevancy to project purposes is not clearly defined in the project description. There should be special explanation of large items (such as heavy travel costs, large printing expenditures, extensive clerical services, high salary rates) indicating why these

are deemed necessary for the proper conduct of the project.

The Budget Justification should also contain pertinent information concerning the applicant's other sources of support, including the status of various commitments from other sources (contribution in hand, promised, potentially available), information about contributing organizations other than the applicant itself, and cash in hand at the time of application. Applicants depending on fund raising or fees-for-service for "matching" should provide some evidence that their expectations are based on some reasonable assessment of past experience, experience of similar organizations in the same community, or other indices.

The extent and type of detail and explanation in the narrative will depend on the financial structure and particular needs of the project. The important consideration is that all components and items of the budget be explained with sufficient clarity to permit an intelligent evaluation by those responsible for review of applications.

The Budget Justification pertains to the project period only.

BUDGET FORM B, "ESTIMATED BUDGET FOR FIVE YEAR PERIOD"

START-UP GRANTS ONLY. This form is self-explanatory. Enter estimated program expenditures anticipated for five years from the date of beginning operation. The "date of beginning operation" means the date that services will first be delivered to some or all of the persons to be served. A dash may be used to indicate that the estimated expenditures for a particular item will remain the same as those represented for the previous year. Blank spaces will indicate that no expenditures are anticipated.

If a major change is represented that the applicant feels should be explained, a brief notation may be made on the form or a narrative explanation may be attached.

BUDGET FORM B2, "SUPPORTING BUDGET ESTIMATES FOR PROGRAM STAFF"

START-UP GRANTS ONLY. Complete this schedule of positions and salaries to support the estimated expenditures for staff compensation claimed in Budget Form B.

BUDGET FORM C, "ANTICIPATED SOURCES OF REVENUE"

START-UP GRANTS ONLY. Enter the amount of funds anticipated from various sources of program support for each year entered on Budget Form B on the first page. On the second page, check the column which most accurately describes the nature of the commitment of these sources. "Definite" means that a formal agreement, contract, grant, or promisory note has been made official, or that agreements to pay fees have been signed by those who will use the service, their parents, or guardians; "definite subject to periodic reviewal" means that any of the above must be renegotiated or renewed annually or otherwise during the five-year period, and should be explained; "promised" means that the pledge or informal agreement has been made; applied for but not promised" means that the organization has applied for or requested formal agreement, contract, grant, or other commitment which has not been granted; "expected to be available" means that the applicant is eligible for funds

from a particular source and has reason to believe that the source will in fact make funds available upon request or application, or that service recipients, their parents or guardians will be able to pay. Entries under "expected to be available" should be supported by comments. Add any comments you think will clarify or support the reasons for your anticipations; use continuation sheets if necessary.

### NARRATIVE PROJECT DESCRIPTION

A narrative project description is to be typed on as many 8 1/2" x 11" sheets as are necessary, following the outline included with the application forms. The project description should describe clearly and concisely the proposed project for which assistance is requested. It is important that the narrative follow the outline given, indexed, and include the information requested in the order given.

This section constitutes the heart of the grant application. It is the applicant's description of the project--its aims, what will be done, how it will be done, who will be involved, and what is expected to result. Together with the project budget, it constitutes the primary evidence to the Council of the soundness of the project, the planning that has gone into its formulation, and the responsibilities and qualifications of those who will be involved.

This section will be the principal focus of the evaluation which will determine whether the application will be funded. In preparing it, the applicant should refer to the General Guidelines for the type of grant sought and any relevant standards or program guidelines furnished or cited in the application materials.

If the applicant wishes to append documents as supplemental information, they should be listed on the last page of the description and appended.

### BIOGRAPHICAL SKETCHES OF PROFESSIONAL PERSONNEL AND CONSULTANTS

Attach brief summaries of the background and qualifications of all professional personnel and consultants who are known at the time of making application. Include biographical sketches of any non-professional personnel who will plan a key role in the project. Resumes or curricula vita may be attached if it is more convenient for the applicant, but brief summaries are preferred. Information to be included in the summaries should be relevant to the role to be assumed relative to the project.

### FINANCIAL INTEREST DISCLOSURE

"Persons having a financial interest in this contract (grant)" includes anyone who will realize financial benefits, including personnel and consultants, but not including volunteers who will be reimbursed for expenses. Firms or persons whom the applicant intends to contract with for renovations, publications, or other services related to the grant should also be listed.

### CIVIL RIGHTS ASSURANCE

This form requires an official signature signifying that the applicant has read and agrees to comply with civil rights requirements.



### PROOF OF VOLUNTARY NON-PROFIT STATUS

Applicants must submit proof of their non-profit status if they are private agencies or organizations. Any of the following shall be acceptable evidence of non-profit status: (1) A reference to the organization's listing in the Internal Revenue Service's most recent cumulative list of organizations described in the Internal Revenue Code as tax exempt; (2) a copy of a currently valid Internal Revenue Service tax exemption certificate; (3) a statement from a State taxing body or the State Attorney General certifying that the organization is a non-profit organization operating within the State and that no part of its net earnings may lawfully inure to the benefit of any private shareholder or individual; (4) a certified copy of the organization's certificate of incorporation or similar document if it clearly establishes the non-profit status of the organization; or (5) any of the above proof from a State or national parent organization, and a statement signed by the parent organization that the applicant organization is a local non-profit affiliate.

### AUTHORIZATION OF SIGNATURES

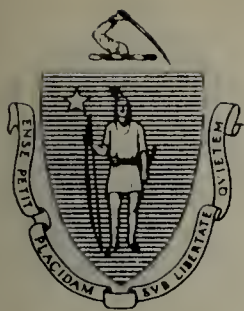
Private non-profit agencies and organizations must submit a secretary or clerk's certificate giving authority to a specific individual to sign the application and any subsequent official correspondence, and the date the Board of Directors voted such authority.

### DOCUMENTATION OF ACTUAL NEED

START-UP GRANTS ONLY. Applicants who intend to initiate or expand a service must submit evidence that there is an actual need for such a service in the community or communities to be served. Any of the following shall be acceptable evidence of actual need: (1) A waiting list; (2) a letter from the Superintendent of a State institution describing the placements that may be anticipated from that institution; (3) letters from community agencies verifying the need for such a service for community residents known to them; or (4) letters from local parent organizations verifying the need for such a service to community residents known to them.

Documentation of actual need may include the naming of specific individuals or, for confidentiality purposes, may represent facts about individuals which describe them without permitting identification of specific individuals.

The documentation of actual need should give evidence that persons on waiting lists or submitting letters have been appraised of the program's purposes, eligibility and selection criteria, fees and other information which would be relevant to their judgement concerning the number of persons who could or would use the program.



*The Commonwealth of Massachusetts*  
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LETTER OF INTENT TO APPLY

This form should be returned to the Massachusetts Developmental Disabilities Council immediately whenever an applicant intends to develop a formal application. This declaration of intent to apply does not in any way bind the applicant.

In some instances, further information, regulations, or standards will be sent to the applicant upon receipt of this letter. It is, therefore, ESSENTIAL THAT THIS LETTER BE RETURNED AS SOON AS THE APPLICANT DECIDES TO PREPARE AN APPLICATION.

TYPE OF GRANT	
<input type="checkbox"/> Community Residence Start-up Grant	<input type="checkbox"/> New Program or Project
<input type="checkbox"/> Day Care Start-up Grant	<input type="checkbox"/> Adaptation or Expansion of Ongoing Program or Project
<input type="checkbox"/> Early Childhood Intervention Materials	
<input type="checkbox"/> Project of Statewide Significance	
NAME OF AGENCY OR ORGANIZATION	
ADDRESS	
TELEPHONE NUMBER	
NAME OF INDIVIDUAL RESPONSIBLE FOR DEVELOPING APPLICATION	
TYPE OF AGENCY	
<input type="checkbox"/> PUBLIC	<input type="checkbox"/> PRIVATE NON-PROFIT
<input type="checkbox"/> OTHER (SPECIFY)	
SUMMARY OF INTENDED PROPOSAL	
Attach a brief summary of the goals and objectives of the proposed project, essential facts about the program or methodology, location, age group to be served, and other basic information relevant to your application. This summary should not exceed three pages.	







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- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | Project of Statewide Significance      |
| <input type="checkbox"/> | Early Childhood Intervention Materials |
| <input type="checkbox"/> | Community Residence Start-up           |
| <input type="checkbox"/> | Day Care Start-up                      |

Application Number (Leave Blank)

APPLICATION CHECKLIST

Applicant Agency: \_\_\_\_\_

Title of Project: \_\_\_\_\_

Date of Submission: \_\_\_\_\_

ONE COPY OF THIS LIST MUST BE RETURNED WITH THE COMPLETED APPLICATION MATERIALS.  
APPLICANTS ARE ADVISED THAT THE APPLICATION WILL NOT BE REVIEWED IF INCOMPLETE.

I. APPLICATION (20 Copies)

Enclosed

Not Required\*\*

- \*Face Sheet with Signatures
- Project Summary
- Budget Form A
- Budget Justification
- Budget Forms B-C (Start-up Grants Only)
- Narrative Project Description
- Biographical Sketches or Vitae
- Letters of Agreement or Support
- 4C's Review (Day Care Start-up Only)
- Other Supporting Materials as Listed on
- Last Page of Narrative Project Description



II. STANDARD ATTACHMENTS

- \*Human Rights Assurances (5 Copies)
- \*Civil Rights Assurance (2 Copies)
- \*Financial Interest Disclosure (2 copies)
- Proof of Non-profit Status (2 Copies)
- \*Authorization of Signatures (2 Copies)
- Documentation of Actual Need (2 Copies, Start-up Grants Only)
- \*Representations (2 Copies, Community Residence Start-up Grants Only)
- Indirect Cost Agreement (2 Copies)



\*\*Refer to General Guidelines for clarification of requirements.

\*Require signatures.





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*Leverett Pattonstall Building, Room 909*

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## DEVELOPMENTAL DISABILITIES GRANT APPLICATION

Title of Project:		
Name and Address of Applicant Agency or Organization:		
Name and Title of Project Director:		
Name, Title, and Address of Financial Officer:		
Type of Agency or Organization:		
State _____ Other Public _____ Private Nonprofit _____		
Proposed Term of Project:	Total Funds Involved:	
Anticipated Starting Date: _____	Requested PL 91-517	Other Sources
Anticipated Completion Date: _____		

### Terms and Conditions:

The undersigned accept, as to any grant awarded, the obligation to comply with: terms and conditions pertinent to the awarding program, Administering Agency "Conditions of Grant Awards" (Form DDA-7250), and Other Federal and State Statutes and Regulations relevant thereto, Title VI of the Civil Rights Act of 1964 (P.L. 88-352) and the Regulation issued pursuant thereto. The undersigned also certify that they have no commitments or obligations inconsistent with compliance with the above.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature and Title of Responsible Officer







*The Commonwealth of Massachusetts*  
*Massachusetts Developmental Disabilities Council*  
*Leverett Saltonstall Building, Room 909*  
*100 Cambridge Street*  
*Boston 02202*

area code 617  
727-4178

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | Project of Statewide Significance      |
| <input type="checkbox"/> | Early Childhood Intervention Materials |
| <input type="checkbox"/> | Community Residence Start-up           |
| <input type="checkbox"/> | Day Care Start-up                      |

Application Number (Leave Blank)

APPLICATION SUMMARY

Title of Project:  
Applicant Agency:  
Project Location:  
Name and Title of Project Director:  
Project Period Proposed (Dates):  
Total Funds Involved:  
Total P.L. 91-517 Funds Requested:

SUMMARY OF PROPOSED WORK (300 words or less; omit confidential data):

Leave This Space Blank





## BUDGET FORM A

## PROPOSED BUDGET FOR GRANT PERIOD

### Refer to "Conditions of Grant Awards" for Clarification of Allowable Costs

PERSONNEL					
Position	Annual Salary	% Time on Project	Time Period	Amount Required	Anticipated Source of Payment (Specify P.L. 91-517 or Other Source)
Fringe Benefits for Personnel:					
Total Required:					All sources
Total Requested:					P.L. 91-517 Funds only



CONSULTATION FEES AND VOLUNTEER COSTS

Nature of Expense	Rate of Payment	Unit of Payment	Time Period	Amount Required	Anticipated Source of Payment (Specify P.L. 91-517 or Other Source)
Total Required:					All sources
Total Requested:					P.L. 91-517 Funds only

TRAVEL

Nature of Expense	Rate of Payment	Unit of Payment	Time Period	Amount Required	Anticipated Source of Payment (Specify P.L. 91-517 or Other Source)
Total Required:					All sources
Total Requested:					P.L. 91-517 Funds only





EQUIPMENT		
Nature of Expense	Amount Required	Anticipated Source of Payment (Specify P.L. 91-517 or Other Source)
Total Required:		All sources
Total Requested:		P.L. 91-517 Funds only

SUPPLIES, MATERIALS AND PUBLICATION COSTS		
Nature of Expense	Amount Required	Anticipated Source of Payment (Specify P.L. 91-517 or Other Source)
Total Required:		All sources
Total Requested:		P.L. 91-517 Funds only





FURNISHINGS		
Nature of Expense	Amount Required	Anticipated Source of Payment (Specify P.L. 91-517 or Other Source)
Total Required:		All sources
Total Requested:		P.L. 91-517 Funds only

RENOVATIONS		
Nature of Expense	Amount Required	Anticipated Source of Payment (Specify P.L. 91-517 or Other Source)
Total Required:		All sources
Total Requested:		P.L. 91-517 Funds only



SPACE OCCUPANCY					
Nature of Expense	Rate of Payment	Unit of Payment	Time Period	Amount Required	Anticipated Source of Payment (Specify P.L. 91-517) or Other Source)
Total Required:					All sources
Total Requested:					P.L. 91-517 Funds only

OTHER DIRECT COSTS	
Nature of Expense	Anticipated Source of Payment (Specify P.L. 91-517) or Other Source)
Total Required:	All sources
Total Requested:	P.L. 91-517 Funds only





BUDGET SUMMARY					
Expenses	Total Amount Required	P.L. 91-517 Funds Requested	% of Total	Funds from Other Sources	% of Total
Personnel					
Consultant-Volunteer					
Travel					
Equipment					
Supplies, Materials and Publication Costs					
Furnishings					
Renovations					
Space Occupancy					
Other Direct Costs					
INDIRECT COSTS:					
TOTALS:					

## BUDGET JUSTIFICATION

Attach a narrative explanation of any budget items whose need or relevancy to project purposes is not clearly defined in the narrative project description. Refer to the Instructions (page 5) for further guidance.



BUDGET FORM A2

ITEMIZATION OF EQUIPMENT AND FURNISHINGS

[illegible]





DEVELOPMENTAL DISABILITIES PROJECT GRANT

FINANCIAL INTEREST DISCLOSURE

The applicant certifies under the penalties of perjury that the following sets forth the names and addresses of all persons having a financial interest in this contract, not including, however, any person whose only financial interest consists of the holding of one percent or less of the capital stock of a corporation contracting to provide services, in accordance with the provisions of the General Laws, Chapter 7, Section 14A, as inserted by Chapter 844 of the Acts of 1963:

NAME

ADDRESS

The undersigned is authorized to make these assurances on behalf of the applicant, and assures compliance by his signature.

Legal Name of Applicant: \_\_\_\_\_

Name and Title of Responsible Officer: \_\_\_\_\_

Signature of Responsible Officer: \_\_\_\_\_ Date: \_\_\_\_\_



**ASSURANCE OF COMPLIANCE WITH THE DEPARTMENT OF  
HEALTH, EDUCATION, AND WELFARE REGULATION UNDER  
TITLE VI OF THE CIVIL RIGHTS ACT OF 1964**

\_\_\_\_\_ (hereinafter called the "Applicant")  
(Name of Applicant)

HEREBY AGREES THAT it will comply with title VI of the Civil Rights Act of 1964 (P.L. 88-352) and all requirements imposed by or pursuant to the Regulation of the Department of Health, Education, and Welfare (45 CFR Part 80) issued pursuant to that title, to the end that, in accordance with title VI of that Act and the Regulation, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department; and HEREBY GIVES ASSURANCE THAT it will immediately take any measures necessary to effectuate this agreement.

If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Applicant by the Department, this assurance shall obligate the Applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. If any personal property is so provided, this assurance shall obligate the Applicant for the period during which it retains ownership or possession of the property. In all other cases, this assurance shall obligate the Applicant for the period during which the Federal financial assistance is extended to it by the Department.

THIS ASSURANCE is given in consideration of and for the purpose of obtaining any and all Federal grants, loans, contracts, property, discounts or other Federal financial assistance extended after the date hereof to the Applicant by the Department, including installment payments after such date on account of applications for Federal financial assistance which were approved before such date. The Applicant recognizes and agrees that such Federal financial assistance will be extended in reliance on the representations and agreements made in this assurance, and that the United States shall have the right to seek judicial enforcement of this assurance. This assurance is binding on the Applicant, its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this assurance on behalf of the Applicant.

Dated \_\_\_\_\_  
\_\_\_\_\_ (Applicant)

By \_\_\_\_\_  
(President, Chairman of Board, or comparable  
authorized official)

\_\_\_\_\_  
(Applicant's mailing address)





## EARLY CHILDHOOD INTERVENTION MATERIALS

### OUTLINE AND INSTRUCTIONS FOR DEVELOPING THE NARRATIVE PROJECT DESCRIPTION

A narrative project description is to be typed on as many 8 1/2 x 11 sheets as are necessary, following the outline of this form. The project description should describe clearly and concisely the proposed project for which assistance is requested. It is important that the narrative include the information requested in the order given and that index headings be used for ease of review.

This section constitutes the heart of the application. It will be the principal focus of the evaluation which will determine whether the application will be funded. In preparing it, the applicant should refer to the General Guidelines for Grants for Early Childhood Intervention Materials.

If the applicant wishes to append documents as supplemental information, they should be listed on the last page of the description and appended.

#### 1. Goals and Objectives

The applicant should describe in either narrative or outline form, the goals and objectives of the proposed project.

#### 2. Background and Need

Indicate (a) the nature of the problem and the need to be met, (b) the constituents and geographic locations of the target groups to be affected or benefitted, (c) how it is expected that the project will affect the problem or need and what anticipated impact the materials will have on early childhood intervention on a statewide basis. Provide sufficient background to permit a full understanding of the objectives. This should include evidence that the applicant is conversant with existing early childhood intervention materials or those being otherwise developed and that the applicants efforts will not duplicate them.

#### 3. Project Activities

Indicate as precisely as possible how the project will be executed. Provide (a) a description of the tasks to be done and the results expected from these tasks, (b) describe the resources to be used, the roles of participating agencies, sources of information, personnel required and costs, (c) an approximate timetable showing when the applicant anticipates completion of various activities, (d) a description of provisions for giving special considerations to the needs of urban and rural poverty.

#### 4. Staff and Staff Organization

Provide a description of the staffing pattern, staff responsibilities and supervisory relationships of various staff (in either narrative or graphic form) for the proposed project activities. Attach biographical sketches of key personnel - project director, writers, editors, consultants, etc.

5. Cooperating or Participating Organization

List all other groups or agencies (a) who have participated or will participate in the development of the materials, (b) who will participate in distribution of the materials, (c) whose co-operation or support is necessary for the success of the project. If not previously set out, indicate their role in the project and relationships with the applicant. Wherever possible, furnish evidence of the support or willingness to undertake the project role of such agencies or groups (letters of agreement, support or endorsement by authorized officials).

6. Qualifications and Facilities of Applicant

Describe the past achievements, experience and other activities which qualify the applicant to conduct the project. Describe the relationship of the proposed project, to the purposes, goals, mandates and/or authorities of the applicant organization. Describe facilities and resources available to the applicant for the project.

7. Project Materials

Describe the nature and scope of the materials and what specific forms they will take, (booklets, curricula, audio-visual materials, etc.) If materials already exist, submit 15 copies or other information (table of contents, summaries, and bibliographies) which clearly show the nature and scope of the materials. Indicate (a) what impact the materials will have relative to early childhood intervention, (b) how many copies will be published or reproduced with project funds, (c) to whom these copies will be made available, (d) how they will be distributed.

8. Post-Project Activities

Describe any continuing effects you expect to result from the project. Make specific reference to plans for the continued use and distribution of materials. Indicate what prospects exist for up-dating and/or future reproduction after Federal support has been terminated.

9. Project Evaluation

Indicate what methods will be used to evaluate the quality and effectiveness of the materials. This evaluation plan will later become the basis for reporting the progress of the approved project.

10. Supporting Data and Other Information

List any supporting data or other information appended to the narrative (including letters of agreement or endorsement, biographical sketches, proposed tables of contents, bibliographies, manuscripts).



## GUIDELINES AND INSTRUCTIONS FOR DEVELOPING HUMAN RIGHTS ASSURANCES

### A. HUMAN RIGHTS POLICY STATEMENT

All applicants for P.L. 91-517 funds must provide adequate assurances that they are and will continue to be in compliance with the Massachusetts Developmental Disabilities Council's policies regarding the rights and welfare of human subjects. These policies incorporate those of the Department of Health, Education and Welfare as outlined in "The Institutional Guide to DHEW Policy on Protection of Human Subjects". These policies might be summarized as:

1. The applicant must provide adequate safeguards against potential risks to the rights and welfare (including human dignity and privacy as well as physical risks) of persons affected by the proposed project.
2. The potential benefits of the project to participating persons or to humanity in general must outweigh any probable risks to individuals involved.
3. The applicant must develop and employ informed consent procedures which will be adequate and appropriate.
4. The applicant must provide whatever professional attention or facilities are required to safeguard the rights and welfare of individuals involved in the project.

### B. THE HUMAN RIGHTS COMMITTEE

All applicants must have or convene a Human Rights Committee to review the project proposal and submit assurances to the Massachusetts Developmental Disabilities Council that the applicant is and will be in compliance with the policies outlined above.

The committee must be comprised of sufficient members with varying backgrounds to assure complete and adequate review of the project. The committee may be an existing one, or one especially appointed for the purpose. The applicant may utilize staff, consultants, or both--however, committee structure must comply with DHEW policy prohibiting any person with "professional responsibility" from serving on the project's human rights committee and must comply with MDDC policy requiring at least a one-third membership on all grantee human rights committees of persons who are totally unaffiliated with either the project itself or any sponsoring institution.

The committee must agree to and establish appropriate plans for a continuing exchange of information and advice between itself and the project director, particularly to deal with proposed changes in project or activity design which might affect human subjects, and with emergent problems which may alter the situation with regard to risks or safeguards.



The only exception to the requirement of a Human Rights Committee will occur in the event that the applicant believes there will be no contact with human subjects in the conduct of a proposed project. In this event, the Human Rights Committee of the Massachusetts Developmental Disabilities Council may act as the applicant's committee in reviewing the project for certification that no human subjects will be involved.

C. ASSURANCES

The applicant must submit assurances of compliance with human rights policies to the Massachusetts Developmental Disabilities Council as part of his application for P.L. 91-517 funds. This requirement includes agencies which have a statement of general institution compliance on file with DHEW.

An example statement of human rights assurances is attached.

D. HUMAN RIGHTS SURVEILLANCE FOR P.L. 91-517.

The Massachusetts Developmental Disabilities Council has filed a general statement of compliance with DHEW assuring that it will be accountable for human rights surveillance of all projects funded under P.L. 91-517 in the Commonwealth. To do this, it has established a Human Rights Committee of its own which will be responsible for reviewing all human rights assurances submitted by applicants, and for meeting with applicants' human rights committees and project staff from time to time to determine the adequacy of protections and monitoring.

One member of the Human Rights Committee of the MDDC will have primary responsibility for each project, and will be the applicant's main contact with the Council regarding human rights aspects of the project.

E. CONSULTATION AND TECHNICAL ASSISTANCE

Applicants and human rights committees may obtain consultation or technical assistance concerning human rights requirements, provisions, or assurances from:

Mr. Henry Porter, Esquire  
Bureau of Developmental Disabilities  
Room 909  
100 Cambridge Street  
Boston, Massachusetts 02202  
Telephone: (617) 727-4179

## EXAMPLE STATEMENT WITH INSTRUCTIONS

HUMAN RIGHTS ASSURANCES

The (INSTRUCTION: Insert name of applicant agency or organization) will comply with the policy of the Massachusetts Developmental Disabilities Council for the protection of human subjects participating in projects or activities supported by grants and contracts made by DHEW through the Massachusetts Developmental Disabilities Council. This compliance will include a review independent of the investigator or director to safeguard the rights and welfare of those human subjects. The application for a grant from the Massachusetts Developmental Disabilities Council (INSTRUCTION: Insert name of project or activity) was submitted by this agency or organization on behalf of (INSTRUCTION: Insert name of project director), who will be charged with the responsibility for informing all staff of the conditions of this assurance. An initial review of the aforementioned application indicates that:

(1) In the opinion of this agency's (organization's) committee, the risks to the rights and welfare of individuals affected by this project or activity are:

(INSTRUCTION: The Committee should here identify in general terms those risks--to human dignity and privacy as well as physical comfort and safety--that it recognizes as probable occurrences, such as use of case records and materials, use of photos and movies, observation of procedures without knowledge of observee, aggravation of anxiety status through contact with interviewers, future association of subject with answers to questions, fatigue brought on by exposure to extensive test battery, or possibility of side effects to drugs employed for sedation purposes; or, NONE).

The Committee states that adequate safeguards against these risks have been provided and are as follows: (INSTRUCTION: Outline procedures for maintaining confidentiality of records, providing medical protection, or other safeguards relevant to risks).

(2) In the opinion of the Committee, the potential benefits of this activity to participating individuals or to humanity in general outweigh any probable risks.

(INSTRUCTION: The Committee should identify the benefits to the individual or to mankind in general that will accrue through the individual's participation in the project; this should be followed by discussion weighing the risks against the benefits; the Committee should make its own judgements, based on common sense, as to the nature and magnitude of both risks and benefits).

(3) In the opinion of the Committee the following informed consent procedures will be adequate and appropriate: (INSTRUCTION: The minimum consent document to be used should be attached. In addition, the actual consent procedures to be used should be described; i.e., "Students responding to the attached advertisement will be interviewed", "The project outline will be submitted to the executive council of the PYA", "Individual teachers will be asked to allow an observer in the rooms chosen", "Superintendents of several state mental hospitals will be approached. The attached statement to the next of kin or guardian will be signed by the principle investigator and superintendent," "The following consent form will be signed by each subject and his or her spouse or next of kin before acceptance of the subject", "No prior consent will be sought. The following debriefing schedule will be followed within 30 minutes after completion of the test".)



(4) The Committee agrees to arrange for a continuing exchange of information and advice between itself and the investigator or director, particularly to deal with proposed changes in project or activity design which might affect human subjects, and with emergent problems which may alter the project's situation with regard to the criteria cited above. This exchange will be implemented through: (INSTRUCTION: It should be indicated whether the investigator or director will be required to submit written reports, or to appear for interviews, or will be visited by the Committee or Committee representatives, and at approximately what intervals these steps will be carried out).

(5) This agency (organization) will provide whatever professional attention or facilities are required to safeguard the rights and welfare of human subjects.

(6) Minutes will be kept of all Committee meetings and will be made available to the Massachusetts Developmental Disabilities Council on request.

(7) The signatures, names, and occupations or titles of the members of the Committee are as follows: (INSTRUCTION: The Committee must be composed of sufficient members with varying backgrounds to assure complete and adequate review of the project. The Committee may be an existing one, or one especially appointed for the purpose. The institution may utilize staff, consultants, or both - however, Committee structure must comply with DHEW policy prohibiting any person with "professional responsibility" from serving on that project's human rights committee and must comply with MDDC policy requiring at least a one-third membership on all grantee human rights committees of persons who are totally unaffiliated with either the project itself or any sponsoring agency or organization.)

NAME	OCCUPATION OR TITLE	EARNED DEGREES, CERTIFICATES, ETC.
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NAME	OCCUPATION OR TITLE	EARNED DEGREES, CERTIFICATES, ETC.
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NAME	OCCUPATION OR TITLE	EARNED DEGREES, CERTIFICATES, ETC.
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Date of Committee Approval \_\_\_\_\_

(8) Official signing for Institution \_\_\_\_\_

SIGNATURE

TITLE

INSTITUTION

DATE

TELEPHONE NUMBER





